## 15750 U.S. PTO



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Robert J. Oliveira et al.

Serial No.:

Unknown

Examiner: Unknown

Filed:

December 5, 2003

Group Art Unit: Unknown

For:

USER DISPOSABLE SLEEVE FOR USE WITHIN THE EAR CANAL

Docket:

1043.1108101

## TRANSMITTAL SHEET

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: <a href="EV 315612308 US">EV 315612308 US</a>, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 5th day of December 2003.

By Kathleen L. Boekley

Kathleen L. Boekley

We are transmitting herewith the attached Patent Application including the following:

[XX]	THIRTY-FOUR	(34) Sheet(s)	of Specification
------	-------------	---------------	------------------

- [XX] FORTY-EIGHT (48) Claim(s)
- [XX] ONE (1) sheet of Abstract
- [XX] SEVEN (7) Sheet(s) of Formal Drawings
- [XX] Executed Declaration and Power of Attorney
- [XX] Small entity status under 37 C.F.R. §§ 1.9 and/or 1.27 is claimed
- [XX] An Assignment of the invention to <u>Hearing Components</u>, <u>Inc.</u>, is being filed contemporaneous with this patent application

[]	A certified copy of a	application, Serial No	_, filed _	:
	the right of priority of which	h is claimed under 35 U.S.C. § 119.		



CLAIMS AS FILED						
	(1)	(2)	Small Entity Other		ther	
For:	# Filed	# Extra	Rate	Fee	Rate	Fee
Basic Fee	1	0		\$385		\$770
Total Claims	48 - 20 =	28	X 9 =	\$252	X 18 =	\$
Independent Claims	4 - 3 =	1	X 43 =	\$43	X 86 =	\$
( ) Multiple Dependent Claim Presented			+ 145 =	\$0	+ 290 =	\$
TOTAL			\$680	•	\$	

<sup>\*</sup>If the difference in Column (1) is less than zero, enter "0" in column 2.

ſ	1	Other
L	_	

[XX] A check in the amount of \$680.00 is enclosed.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

y: Kung

David M. Crompton, Reg. No.

Customer No. 28075

David M. Crompton CROMPTON, SEAGER & TUFTE, LLC 1221 Nicollet Avenue, Suite 800 Minneapolis, MN 55403-2420 Telephone: (612) 677-9050

Facsimile: (612) 359-9349